

Shipper's PAL Material Transmittal Form

GS-13 Form 3

FAX to: 573-526-5636 or EMAIL to: PAL@modot.mo.gov For assistance call: 573-751-6735

Shipper Name:							
FAX Number:			Phone Number:				
The following material will be shipped to the indicated project. The material meets PAL requirements.							
Material (and Manufacturer if different than Shipper)	Brand Name (may not apply)	Contract No.	Line No.	Shipping Date	Quantity & Units	PAL Ident. No. (Entered by MoDOT)	
Name:				For M	For MoDOT Use Only:		
Signature:	Response Desired By: ? Email or ? Fax				Authorizing Agent:		
Title:	Date:				Authorized Date:		
Email address:				<u> </u>			